

## Attachment B

Letter of Agreement (LOA) for Social Prescribing

Letter of Agreement (LOA) for Social Prescribing 2025-26

THIS AGREEMENT is made as of,2025-04-01

BETWEEN:

**United Way British Columbia**, a registered charity operating in the Lower Mainland, Fraser Valley, Southern Interior, Thompson-Nicola-Cariboo, Central and Northern Vancouver Island, and Northern BC regions of British Columbia, and having its head office at 4543 Canada Way, Burnaby, British Columbia ("UWBC")

AND:

Grant Recip\_ient Information:

*Provide the following information:*

**Organisation Name (Grantee):**City of New Westminster

**Executive Director (or designate):**Erica Mark

**Executive Director Email Address:**emark@newwestcity.ca

**Website:**newwestcity.ca

**Address:**511 Royal Ave

**City:**New Westminster

**Province:**BC

**Postal Code:**V3L 1H9

@Non-Profit0Indigenous Governing Body

Is this organisation a Qualified Donee:

**Charitable Reg. No. (if applicable).**

**BC Society No.:**

**First Nation No.:**

**Other Identifier Description:** Registered municipality

(the "Grantee" and, together with UWBC, the "Parties")

CONTEXT:

A. The Grantee is a "grantee organization" within the context of this agreement.

- B. The Grantee is seeking financial support for the initiative described in [Schedule A](#) to this Agreement (the "**Program**");
- C. UWBC wishes to support the Grantee in delivering the initiative by making a grant to the Grantee; and
- D. Capitalized terms not otherwise defined in the main body of this Agreement are defined in [Schedule D](#).

**THEREFORE**, in consideration of the mutual premises contained in this Letter of Agreement (collectively with all schedules, the "**Agreement**") and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the Parties agree as follows:

## **Section I - UWBC Commitments**

### Grant Funds

1. Subject to the terms and conditions of this Agreement, UWBC will deliver a total of **\$120,000.00** (the "**Grant Funds**") to the Grantee according to the funding distribution schedule set out in [Schedule B](#) to this Agreement (the "**Distribution Schedule**").

### Adjustments

2. UWBC's obligation to deliver the Grant Funds according to the Distribution Schedule is subject to UWBC having access to funds to do so. If UWBC does not have access to funds, UWBC may decide to reduce the amount of Grant Funds **[and/or revise the Distribution Schedule]**.
3. If UWBC decides to reduce the amount of Grant Funds **[and/or revise the Distribution Schedule]**, UWBC will deliver written notice of the reduction **[and/or revision]** to the Grantee as soon as practicable after its decision.
4. As soon as practicable after receiving the written notice of the reduction of Grant Funds **[and/or revision to the Distribution Schedule]** from UWBC, the Grantee will deliver to UWBC a written proposal setting out how it plans to allocate the funds in light of such reduction **[and/or revision, as applicable]** (the "**Adjustment Proposal**").
5. If UWBC approves the Adjustment Proposal, UWBC will notify the Grantee in writing of its approval and will deliver the Grant Funds as reduced **[and/or as set out in the revised Distribution Schedule, as applicable]**. If UWBC does not approve the Adjustment Proposal, acting reasonably, UWBC will notify the Grantee in writing

that it has not been approved and the Grantee may prepare and deliver an amended Adjustment Proposal for UWBC's consideration within **[30]** days of such notification.

6. If UWBC approves the amended Adjustment Proposal, UWBC will notify the Grantee in writing of its approval and will deliver the Grant Funds as reduced **[and/or as set out in the revised Distribution Schedule, as applicable]**. If UWBC does not approve the amended Adjustment Proposal, acting reasonably, UWBC will notify the Grantee in writing that it has not been approved.
7. Any Adjustment Proposal or amended Adjustment Proposal approved by UWBC will form part of this Agreement.

## Section II - Promotion and Recognition

### By UWBC

8. The Grantee authorizes UWBC to disclose its relationship with the Grantee in its advertising, promotions, and communications to inform the public of the services offered by the Grantee and to use the name and marks of the Organization.
9. UWBC agrees (within a reasonable time frame) to use reasonable commercial efforts to withdraw or have withdrawn any disclosure made pursuant to paragraph 8 and to cease distributing or broadcasting any public message or printed material involving the use of the Organization's names and marks which in the view of the Organization, acting reasonably, could cause damage to the reputation of the Organization.
10. In furtherance of the Organization's obligations listed below, UWBC will provide to the Grantee the appropriate graphic elements and branding guidelines, including UWBC logo(s) and any other required links.

### By the Organization

11. The Grantee agrees to recognize and promote its relationship with UWBC including the financial support provided UWBC to the Grantee on all advertising and communications pertaining to the areas benefitting from UWBC's funding support. • Specifically, the Grantee agrees to include UWBC's name and marks in its publicity and communications material including but not limited to brochures, newsletters, website content, social media, videos, press releases, presentations, media interviews, and all other written, audiovisual, and public communications (<https://uwbc.ca/media/#toolkit>) See Schedule A-Required Engagement Activities for more details if applicable.

12. The Grantee agrees to offer UWBC the opportunity to be part of presentations, community events and speaking engagements organized by the Organization and to recognize UWBC at these presentations, events, and engagements.
13. The Grantee agrees to participate in donor engagement activities yearly as applicable by providing speakers for UWBC workplace campaigns and events, hosting donor engagement opportunities and working with UWBC's Marketing and Communications team to develop a video, story, social media post for distribution on UWBC channels.
14. The Grantee agrees to place the UWBC logo and other UWBC recognition materials provided to the Grantee by UWBC in a highly visible location within the Grantee (i.e., program site, agency reception, or other high traffic area) and to place the UWBC logo on the Organization's website with a hyperlink to [www.uwbc.ca](http://www.uwbc.ca).
15. The Grantee agrees to use reasonable efforts to follow UWBC's social media accounts and to provide to UWBC the Organization's social media account details.
16. The Grantee agrees to submit to UWBC available success stories and impact statements by clients for use by UWBC in its discretion.
17. The Grantee agrees to withdraw or have withdrawn from circulation and cease distribution of broadcasting (in a reasonable time frame) of any public message or printed material involving the use of UWBC's name or marks which in the view of UWBC, acting reasonably, could cause damages to UWBC.

### Section III - Grantee Commitments

#### Grant Funds

18. The Grantee will only use any Grant Funds to fund the Program in accordance with [Schedule A](#) of this Agreement.
19. The Grantee will return any unused Grant Funds by 11:59 PM on the End Date set out in the Distribution Schedule, or, if applicable, the revised Distribution Schedule.

#### Monitoring and Reporting

20. The Grantee will comply with the monitoring and reporting requirements set out in [Schedule C](#) to this Agreement (the "**Monitoring and Reporting Requirements**").

#### Compliance with Laws

21. The Grantee will at all times comply with all applicable laws.



## Confidential Information

22. The Grantee will not disclose, use or allow unauthorized access to any Confidential Information related to UWBC that it has acquired in connection with this Agreement without UWBC's prior written consent.

## Non-Compliance

23. If UWBC believes the Grantee is not in compliance with this Agreement, UWBC may deliver written notice of the Grantee's non-compliance (the "**Notice of Non-compliance**") to the Grantee:
- (a) identifying the relevant provisions of this Agreement with which the Grantee is not complying; and
  - (b) describing the corrective action the Grantee must take in order to help address its non-compliance and the timelines to do so.
24. If the Grantee receives a Notice of Non-Compliance, the Grantee must take the corrective action within the timelines described in the notice and confirm in writing to UWBC that it has done so (the "**Confirmation of Compliance**").

## Section IV - Compliance and Termination

25. Either Party may terminate this Agreement for any reason by providing the other Party with 90 days' written notice.
26. UWBC may immediately suspend delivery of all or any part of the Grant Funds and/or terminate this Agreement, without notice to the Grantee if:
- (a) UWBC does not receive an amended Adjustment Proposal within **[30]** days of providing the Grantee notice that the Adjustment Proposal was not approved;
  - (b) UWBC does not approve an amended Adjustment Proposal;
  - (c) the Grantee does not comply with any of its obligations under this Agreement;
  - (d) the Grantee receives any notice of or takes any acts or proceedings, or if any act or proceeding is taken against the Grantee, in connection with any liquidation, winding-up, dissolution, bankruptcy, receivership, reorganization or termination of operations of the Grantee;
  - (e) UWBC believes that any actions taken by or on behalf of the Grantee have placed the health and safety of any person involved in delivering the Program, or any beneficiary of the Program, at risk;

- (f) if UWBC does not receive the Confirmation of Compliance from the Grantee within the timelines described in the Notice of Non-Compliance; or
  - (g) if UWBC receives a Confirmation of Compliance and determines on a reasonable basis that the Grantee is still not in compliance as identified in the Notice of Non-Compliance.
27. If this Agreement is terminated for any reason, the Grantee will promptly, and in any event within 30 business days after termination:
- (a) provide UWBC with an accounting of the portion of the Grant Funds that were spent as at the date of termination;
  - (b) return any unspent portion of the Grant Funds to UWBC;
  - (c) inform all persons involved in delivering the Program and all beneficiaries of the Program that UWBC is no longer contributing to or associated with the Program.
28. If this Agreement is terminated for any reason, upon request by UWBC, the Grantee will arrange for an authorized representative of the Grantee to meet with a representative of UWBC to discuss and settle any outstanding issues under this Agreement at a mutually convenient time not more than 30 days following the date of termination.
29. If this Agreement is terminated for any reason, the Monitoring and Reporting Requirements, Clauses 22, 0, and 31 and any other provisions of this Agreement that, by their nature, are intended to survive the termination of this Agreement, will survive termination.

## **Section V- Indemnification and Limitation of Liabili**

30. The Grantee agrees to indemnify and save harmless UWBC from and against all liabilities, claims and demands whatsoever arising at any time in connection with this Agreement or the Program.
31. The Grantee acknowledges that UWBC and its affiliates and their respective officers, directors, agents, servants, employees and volunteers will not be liable for any loss or damages resulting, directly or indirectly, from any action or decision of the Grantee, its affiliates, or their respective officers, directors, agents, servants, employees and volunteers, unless UWBC gave prior written consent to such decision or action.

## **Section VI - General**

32. Each Party agrees that it will execute or deliver such further documents and do such further acts and things as another Party may reasonably request in order to carry out this Agreement.
33. All notices, proposals, and other communication from one Party to the other under this Agreement must be in writing and delivered to the address of the recipient Party set out above, or to such other address as may be specified by such Party to the other.
34. This Agreement may only be amended by an agreement between the Parties in writing. The rights and obligations under this Agreement may not be assigned or transferred by a Party without the prior written consent of the other Party.
35. This Agreement will be construed in accordance with the laws of British Columbia and the federal laws of Canada applicable therein.
36. This Agreement constitutes the entire agreement between the Parties with respect to the subject matter of this Agreement and supersedes any prior understandings or agreements of the Parties with respect to the subject matter of this Agreement. Any provision of this Agreement which is, or becomes, illegal, invalid, or unenforceable will be severed here from and be ineffective to the extent of such illegality, invalidity, or unenforceability, but shall not affect or impair the remaining provisions hereof.
37. Time is of the essence of this Agreement. This Agreement will not be construed as creating a partnership, joint venture, franchise, agency, or other similar relationship between the Parties. Neither Party will have the right, power, or authority to bind the other Party in any way without the other Party's prior written consent.
38. The headings in this Agreement have been inserted for convenience or reference only, and are in no way intended to describe, interpret, define, affect the construction of or limit the scope, extent or intent of this Agreement or any provision in this Agreement. This Agreement may be executed by electronic transmission and in counterparts and all executed and delivered counterparts will be deemed to be an original and together will constitute one and the same Agreement and regardless of the date of execution, will be deemed to have been executed on the Effective Date.



The Grantee hereby agrees to the terms and conditions of this Agreement effective as of the Effective Date by signing and returning this Agreement to UWBC (with all schedules attached):

**Name of Signatory:** Dean Gibson

**Signature:** **Date(MM/DD/YY):**

**Title of Signatory (Board President/Chair, Chief or Designate)::** Director of Parks and Recreation

**Name of Grantee:** City of New Westminster

**Address of Grantee:**  
511 Royal Ave.New Westminster,BC,V3L 1H9

**Name of Signatory:** Lisa Spitale

**Signature:** **Date(MM/DD/YY):**

**Title of Signatory (CEO, Executive Director, Senior Administrator or Designate):**  
Chief Administrative Officer

**Name of Grantee:** City of New Westminster

**Address of Grantee:**  
511 Royal Ave.New Westminster,BC,V3L 1H9

**UWBC Name of Signatory:** Kim Winchell

**Signature:** **Date(MM/DD/YY):**

**Title of Signatory:** Provincial Director, CII

**United Way British Columbia**  
**4543 Canada Way**  
**Burnaby, British Columbia**  
**V5G4T4**



Schedule A - Program/Initiative Description

**General Description**

*Description of Initiative/ Program. Include **who** the activity will benefit (i.e., who are the "charitable beneficiaries"1 and **how** (i.e., what "public benefit" will the beneficiaries receive as a result of the activity taking place).*

The Seniors Community Connector (SCC) works with adults aged 50 and older who are referred by healthcare professionals, community partners, or who self-refer. The SCC assists seniors in connecting with various community supports and services through referrals, application assistance, advocacy, and introductions. In collaboration with each senior, the Community Connector develops a personalized wellness plan tailored to the individual's needs, providing the necessary support to help them age well and remain within their community. In addition to supporting seniors, the program also alleviates the mental and emotional strain on caregivers by offering resources and support for the seniors in their care. By addressing the determinants of healthy aging, the program helps reduce the burden on the healthcare system by focusing on preventative measures and enhancing overall well-being, which can result in fewer health crises and reduced demand for medical services.

**Initiative / Program Goals**

*Key deliverables of the Initiative/Program:*

\*Provide timely intakes and personalized support to seniors, connecting them to programs and resources that address their physical, social, emotional, and mental health needs. \*Monitor and follow up on each participant's progress to ensure continued support and successful outcomes. \*Strengthen partnerships and collaborate with other CBSS organizations to address complex service gaps for the most vulnerable seniors, particularly those without family or friend support. \*Identify service gaps and work with CBSS organizations to identify solutions that may increase resources, expand opportunities and address service gaps \*Enhance and expand community outreach with a focus ori engaging marginalized and equity seeking seniors \*Connect seniors to culturally appropriate services and resources that help them stay connected to the community. \*Strengthen relationships and establish cohesive communication between healthcare providers and community connectors, ensuring seniors receive coordinated and comprehensive support.

**Required Engagement Activities**

*Specific engagement and attendance requirements set by the grantor. This can include meetings, use of platforms, or marketing supports etc.:*

Please refer to the 2025-26 Learning & Evaluation Plan as attached.

**Location**

*Describe the location(s) where the initiative or program will take place (this can be addresses or communities):*

The Community Connector is predominantly at Century House (620 Eighth St., New Westminster); however, the Connector will look to expand service throughout the community to include temesewtxw Aquatic and Community Centre (65 E Sixth Ave., New Westminster), and Queensborough Community Centre (920 Ewen St. New Westminster) Other potential site visits could include: \*Ross Tower - 45 Clute St. \*United Gospel Mission - 658 Clarkson St. \*Sapperton Medical Clinic - 301 E. Columbia St. \*New Westminster Specialized Geriatric Clinic - 230 Ross Dr. \*Umbrella Multi-cultural Health Co-op - 715 Camarvon St.,,The City of New Westminster has the following neighbourhoods: Queensborough, Connaught Heights, West End, Kelvin, Brow of the Hill, Glenbrooke, North Queen's Park, Victory Heights (includes Massey Heights), Sapperton, North Arm, South Arm, Uptown, Downtown, Brunette Creek. We recognize and respect that New Westminster is on the unceded and unsurrendered land of the Halkomelem speaking peoples.,,,,,,New Westminster.

**Duration**

*Provide the anticipated start date and end date for the Initiative/Program. If the start date and/or end date may be affected by any particular factor(s) or circumstance(s), describe said factor(s) or circumstance(s) in the "notes" section below:*

**StartDate(DD/MM/YY):2025-04""'.01EndDate(DD/MM/YY):2026-03-31**

**Notes:**



Schedule B - Distribution Schedule

Term

UWBC will deliver the Grant Funds to the Grantee as follows:

☐ Single Installment                      Multiple Installments

If the Grant Funds will be delivered in multiple installments, write the date on which the first installment will be delivered next to the words "Start Date", and the date on which the last installment will be delivered next to the words "End Date":

Start Date (MM/YY):2025-04-30                                      End Date (MM/YY):2025-10-31

Distribution Schedule				
Upon payment of the final installment, the total amount in the "Amount of Installment" column should be equal to the total amount of the Grant Funds.				
Installment No.	Payable (MM/VY)	Amount of Installment	Grant Stream	GL-Code (internal use)
D-01010	2025-04-30	\$60,000.00	Social Prescribing 2025-26	Ref Doc.
D-01011	2025-10-31	\$60,000.00	Social Prescribing 2025-26	Ref Doc.
Total:		\$120,000.00		



**Schedule C - Monitoring and Reporting Requirements**

Tracking Funds

- 1. The Grantee shall keep separate records in respect of the Grant Funds, and shall ensure that such records contain sufficient information to allow the Grantee and UWBC to determine how the Grant Funds were spent, and what portion of the Grant Funds have been spent at any given time;
- 2. The Grantee shall not allow the Grant Funds or any portion thereof to be used as, or to confer, a Private Benefit.

Reporting Requirements

- 3. UWBC shall provide the Grantee with report templates (the "**Report Templates**"), and the Grantee shall complete the Report Templates and submit them to UWBC in accordance with the following schedule:

- 1. **Type:** Report, **Description:** NA,  
**Deliverable:** 2025-07-31,  
**Information to be Included:** SPP 01 Outcome Report
- 2. **Type:** Report, **Description:** NA,  
**Deliverable:** 2025-10-31,  
**Information to be Included:** SPP 02 Outcome Report
- 3. **Type:** Report, **Description:** NA,  
**Deliverable:** 2026-01-30,  
**Information to be Included:** SPP 03 Outcome Report
- 4. **Type:** Report, **Description:** NA,  
**Deliverable:** 2026-05-08,  
**Information to be Included:** SPP Annual Outcome Report

*\* The "deliverable" date for each interim report should precede the "payable" date for the next installment of the Grant Funds as set out in the Distribution Schedule so that if the Grantee fails to deliver the interim report, or the interim report is not satisfactory, UWBC has time to take appropriate steps (e.g., by suspending delivery of the next installment of the Grant Funds to the Grantee).*

4. In addition, the Grantee shall immediately notify UWBC in writing of any change in circumstances that impacts, or may impact, the intent and purpose of this Agreement, UWBC's ability to comply with its obligations under the *Income Tax Act* (ITA) or the relationship between UWBC and the Grantee, including, but not limited to:

- (a) any change in circumstances that results in, or may result in, the Grantee no longer being a "qualified donee" or a "grantee organization" within the meaning of subsection 149.1(1) of the ITA;
- (b) any change in circumstances that results in, or may result in, the Program or UWBC's support thereof no longer being consistent with or in furtherance of UWBC's charitable purposes;
- (c) any instance of the Grant Funds or a portion thereof being used as, or to confer, a Private Benefit and, more generally, any instance of a Private Benefit being conferred in connection with or in the course of delivering the Program whether or not the Grant Funds contributed to the Private Benefit;
- (d) any change in the involvement of Related Persons or Third Parties in the delivery of the Program, including, but not limited to, the involvement of new Related Persons or Third Parties, or any change in the nature or extent of the involvement of Related Persons or Third Parties;
- (e) any change in circumstances that results in, or may result in, the Grantee being unable to comply with the Monitoring and Reporting Requirements;
- (f) any change in the social, political or financial stability of the area where the Program is being delivered;
- (g) any change in circumstances that affects, or may affect, the Grantee's or UWBC's reputation; and
- (h) the dissolution of the Grantee or any other change in circumstances that results in, or may result in, the Grantee no longer having capacity to deliver the Program, or the suspension or cancellation of the Program.

## Monitoring

5. UWBC may request that the Grantee do any of the following, and the Grantee shall comply with such request as soon as reasonably practicable:

- (a) provide UWBC with information about the Grantee including, but not limited to, information related to the Grantee's finances, property, organizational structure, employees, volunteers and programs and services, and information related to any Related Persons or Third Parties directly or indirectly associated with the Grantee;
- (b) provide UWBC with audit reports, financial statements and bank records of the Grantee for a certain period;
- (c) provide UWBC with invoices and receipts issued to the Grantee for a certain period;
- (d) provide UWBC with records of the Grantee's communications by letter, telephone, videoconference and/or email for a certain period;
- (e) provide UWBC with certain photographs or video in the possession of the Grantee;
- (f) permit UWBC staff to visit any of the Grantee's premises and/or the location where the Program is being delivered.



## Schedule D - Definitions

In this Agreement:

The term ***Related Persons*** has the meaning ascribed to it in section 151 of the ITA.

The term ***Third Parties*** includes any person or entity (e.g., partner organization or contractor) that is or will be involved in delivering the Program, but does not fall within the definition of "Related Persons" set out in this Schedule.

The term ***Grantee*** is a "grantee organization" within the context of this agreement;  
The term ***Confidential Information*** includes any information that is not publicly available or well-known, could reasonably be considered private or proprietary, or could reasonably be expected to cause harm, financial or otherwise, to any person or entity if released, and, without limiting the foregoing, information identified as confidential by UWBC, whether orally or in writing.

The term ***Income Tax Act*** (ITA) is a statute that outlines the rules and regulations governing income tax in the country. It provides the legal framework for determining taxable income, calculating taxes payable, and administering tax collection and enforcement. The ITA contains provisions that define what constitutes taxable income, establish tax rates, and outline the rules for claiming deductions and credits. It also sets out the powers and responsibilities of the Canada Revenue Agency (CRA), which is responsible for enforcing the tax laws and collecting taxes

# Schedule E - Carryover



A maximum of 15% of funds received from United Way BC in 2025-26 may be carried over into 2026-27.

Upon submission of the 2025-26 Annual Outcome Report, including financials, funded organizations with unused amounts over 15% will be sent a revised Letter of Agreement (LOA). All changes to fund disbursement will occur in the 3rd quarter of 2026-27.

<b>Name of Signatory:</b>	<b>Signature:</b>	<b>Date (MMDDIYY):</b>
<hr/>	<hr/>	<hr/>

**Title of Signatory.** *(CEO, Executive Director, Senior Administrator or designate)*

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Funded agencies and their partners play a key role in enabling United Way BC Healthy Aging programs' learning approaches, and helping to continuously improve our programs - locally, regionally, and provincially. Our Learning & Evaluation (L&E) processes will continue to evolve in response to what we learn as our new initiatives are implemented in communities across BC.

Support for, and participation in L&E is an **expected deliverable**<sup>1</sup> for funded agencies. Participating in L&E activities, like training webinars, learning forums, and Communities of Practice (COPs) are valuable sources of support, inspiration, and knowledge. Expectations for agencies are described in this document, as well as resources and supports for L&E activities. Updated versions of these documents will be shared, as they evolve.

## What is Learning & Evaluation for United Way BC Healthy Aging Grants?

When we talk about Learning & Evaluation (L&E), we often describe this as proving, and improving - that is, attempting to understand what works well and what could be improved so that we can increase the impact of projects, programs, and activities. It is a way to demonstrate the impact of our programs and share the value they are creating in communities across BC to members of the Community-Based Seniors' Services (CBSS) sector network, including seniors, volunteers, and our funder, BC's Ministry of Health.

United Way BC will continue to adopt a 'learning systems approach' to learning, evaluation, and quality assurance. The main intention with this approach is to create a safe space where identifying and addressing areas for improvement is not seen as a failure or something to hide, but as a learning opportunity. In a learning system, data, evidence, and experience are continuously collected and integrated into practice to support agencies to improve. Learning systems share similarities with the [Developmental Evaluation](#) approaches that are currently adopted by many organizations in the CBSS sector.

Learning, reflective practice, and knowledge-sharing are central to growth and collaboration, particularly to support program development and quality improvement. United Way BC is pleased to continue to provide learning opportunities and support community engagement activities to help bring as much intentionality and rigor to the process of reflective learning and knowledge-sharing as possible.

- L&E activities will support funded agencies, United Way BC, and other partners to:
- track and describe progress, results, and impacts
  - inform planning, program development, and quality improvements
  - reflect, learn and adapt strategies to improve design and delivery
  - build the capacity of funded agencies to serve priority populations and generally deliver programming as effectively as possible
  - develop knowledge and learn from each other, as well as implement Communities of Practice (COPs)
  - ensure and demonstrate accountability for use of publicly funding dollars

<sup>1</sup> United Way BC understands that from time-to-time, circumstances beyond your control may prohibit your organization's participation in L&E activities. We will work with agencies to best support extenuating circumstances.

## Expectations: Learning & Evaluation Activities

To ensure adoption of promising practices, and for ongoing learning and quality improvement, all funded agencies will be required to participate in certain learning and quality assurance activities. Tools, training, and resources enable local program staff and service providers (volunteers, contractors, etc.) to have the needed mechanisms in place to run efficient, effective programs and provide high quality services that help seniors reinain independent and connected to their community. It is **expected** that funded agencies participate in the following:

**1. Orientation Sessions**

Initial and ongoing orientation sessions for local program staff (online/in person) will be provided by United Way BC staff, as needed.

**2. Data Collection and Outcome Reporting Training Sessions**

Training sessions are available for local program staff about specific data collection and reporting, including training in quality data collection, demonstration of available tools, forms, and resources, and online reporting training (i.e., how to submit and download applications and outcome reports) by United Way BC staff, as needed.

**3. Other United Way BC Training and Learning Opportunities**

Other opportunities may be organized by United Way BC as the program evolves. We will listen to input/suggestions for additional training and learning opportunities from funded agencies and will revisit previously compiled interest areas to build the training/capacity development plan. These may include co-creation sessions, webinars, etc.

**4. Provincial and/or Regional Consultations and Provincial Summit on Aging (if applicable)**

All programs will be invited to participate in the biennial Provincial Summit on Aging. Additionally, Provincial and/or Regional Consultations also offer an opportunity for funded agencies to engage in community partnership-building activities. Similarly, consultations could also be a venue for highlighting grantee-initiated efforts to coordinate programs for seniors in the community. Consultations and the Provincial Summit on Aging are collaborative efforts involving United Way BC Healthy Aging, funded agencies, as well as a diverse group of other leaders in the Community-Based Seniors' Services (CBSS) sector.

**5. Communities of Practice (COPs)**

All programs will participate in regular Community(ies) of Practice (COPs) (monthly, quarterly, etc.), whether in-person and/or virtually. COPs are, *"groups of people who share a concern or a passion for something they do and learn how to do it better as they interact regularly"* ([Henger, et al., 2015](#)). They support and promote knowledge sharing and learning, mutual problem solving, and community partnership building on the part of participating staff and programs. COPs also offer a venue for the professional development of coordinators, and collaborative program- and sector-oriented projects. A Terms of Reference (TOR) may be developed with COP members.

**6. Collaboration**

Collaboration is one of the Guiding Principles (see [Healthy Aging Theory of Change](#)) of Healthy Aging's Program & Service Design; and thus, all United Way BC Healthy Aging funded agencies will want to work in collaboration with one another, other CBSS organizations, varying levels of government, and the health care system.

Healthy Aging Community Collaboratives ("Collaboratives") are strategic networks that work together to ensure collective activities are making a positive impact on seniors, in a given community. Healthy Aging Community Collaboratives identify gaps in seniors' services and opportunities, leverage local expertise and resources for seniors in the community, and jointly determines use of grant funds. Collaboratives are comprised of various members in the community, and should include municipal representatives, Regional Districts, the Health Authority, members of the CBSS sector (including other Healthy Aging funded programs in the community), and non-United Way BC funded agencies that support older adults.

To learn more about the benefits and expectations of collaboration, please watch the recording of Healthy Aging's Program & Service Design Information Session: [\[Recording\] Information Session: 2025-26 United Way BC Healthy Aging's Program Offerings. Including Enhancement Grants on Healthy Aging CORE BC.](#)

7. **Targets and Performance Benchmarks**

2025-26 Healthy Aging applications included targets for participants, goods, and services. Over the fiscal year, United Way BC will work with funded agencies, the Learning and Evaluation (L&E) Task Force, and L&E Advisory Committee to establish performance benchmarks for programs. These will serve as guidance in establishing new programs, and support long-standing programs to find efficiencies, demonstrate accountability for use of funds and measure progress over time. These benchmarks will be informed by and will consider factors, including but not limited to rurality, service delivery area(s), funding amounts, longevity of program, etc. to ensure that targets are achievable and "right-sized" for communities.

8. **Reporting**

United Way BC grants are driven by a community-based approach; thus, we believe it is important to build a solid understanding about each program's development and implementation across many different communities and contexts. All Healthy Aging programs should review United Way BC's [Healthy Aging Theory of Change \(TOC\)](#), which is a visual depiction of the relationship between the work Healthy Aging programs and their partners are doing and the positive changes that are expected to result, as demonstrated by recent research and evidence. Over the course of the year, United Way BC will host learning opportunities which may include webinars, special topics at COPs, etc.

Organizations' roles in supporting reporting activities include:

- a. Collection and reporting of data to United Way BC for each of the Key Attributes for Learning & Evaluation, as outlined below:

Key Attributes for Learning & Evaluation	
1. <b>Program Standards &amp; Progress</b> Assessing adherence to program guidelines as well as funded agencies' interpretation of what is working well and what can be improved.	2. <b>Accessibility/Avallablilty</b> Ensuring programming is accessible to priority populations.
3. <b>Participant Satisfaction</b> Feedback from participants regarding their satisfaction with programming offered.	4. <b>Impact</b> Measuring if, how, and to what extent the model achieves its intended outcomes.

- b. Submission of **Quarterly and Annual Outcome Reports**, in which funded agencies will be expected to report on the following types of indicators:

Attribute	Potential Indicators for Reporting
1. Program Standards & Progress	<ul style="list-style-type: none"> <li>• # of new participants served (annual total)</li> <li>• # of unique participants served (annual total and by service type)</li> <li>• # of services offered (annual total and by service type)</li> <li>• Funded agencies report of: program strengths; areas for improvement; gaps in services; opportunities for mid-course corrections</li> </ul>
2. Accessibility/Avallablilty	<ul style="list-style-type: none"> <li>• Basic demographic information for participants (age, gender, etc.)</li> <li>• % of participants who self-report belonging to two or more priority populations2+ of the following vulnerabilities: (i) low to moderate income; (ii) Socially Isolated/Lonely; (iii) low to moderate frailty; (iv) Member of an Underserved Group Seniors who identify as:• Indigenous• An ethnocultural minority• Newcomers and immigrants• 2SLGBTQIA+ • Living with a disability (may include cognitive, mental health, physical etc.) • Speaking a primary language that is not English • Living in a remote community without access to essential services • And others, as identified by the organization, who may be experiencing barriers to program access.Program report of successes and challenges reaching the target population</li> <li>• Participants report of program accessibility (referral source, barriers to access, suggestions to improve access)</li> <li>• # of participants on waitlist for services (annual total and by service type)</li> </ul>
3. Participant Satisfaction	<ul style="list-style-type: none"> <li>• Participants' self-report of: program satisfaction; program quality; extent to which needs are met; program strengths; areas for improvement</li> </ul>
4. Impact	<ul style="list-style-type: none"> <li>• Impacts for participants, programs, staff/volunteers, communities, and partners</li> <li>• Differences in key intended outcomes, such as but not limited to: <ul style="list-style-type: none"> <li>o Sense of social connectedness</li> <li>o Health, well-being, and quality of life</li> <li>o Availability of social supports</li> <li>o Food security</li> <li>o Community connectedness</li> <li>o Resilience/confidence to age-in-place</li> </ul> </li> </ul>

Please note that additional data requests could arise in response to evolving needs, in consultation with funded agencies. All activities will be informed by expert groups, including but not limited to the CBSS Leadership Council, L&E Advisory Committee, and L&E Task Force.

Data collection will be completed by funded agencies at the individual level as participants register with the program, and on an ongoing basis as participants receive services. Participant level tracking may be more detailed for some programs, depending on the complexity and requirements of the grant.

Funded agencies will be supported to collect the above information through the creation of data collection tools which may include surveys, focus group questions, etc. Effort will also be made to learn from tools already in use by funded agencies, as well as effective strategies adopted in past evaluations, and from partners in other jurisdictions.

Report Type	Deadline	Reporting Period
Quarterly Report 1	July 31, 2025	April 1 - June 30, 2025
Quarterly Report 2	October 31, 2025	July 1 - September 30, 2025
Quarterly Report 3	January 30, 2026	October 1 - December 31, 2025

Report Type	Deadline	Reporting Period
2025-26 Annual Outcome Report	Maya, 2026	April 1, 2025 - March 31, 2026

- c. Check-in(s) and site visits with regional Healthy Aging Specialists - quarterly (where necessary), bi-annually, or annually. Check-in meetings will take place with funded agencies and their local Healthy Aging Specialist to review program progress and explore challenges and potential solutions for moving forward. Check-ins will occur virtually, where possible. **One annual in-person site visit is required.**

If agencies are considering participating in other research or evaluation beyond what is being planned for in this Agreement (outside of local program satisfaction and evaluation activities), we ask that the grantee contacts United Way BC prior to making commitments.

## Resources for Learning & Evaluation Activities

The following resources will support the implementation of L&E activities:

### 1. Program Handbooks & Guides

Program handbooks or guides have been created to support each program. It is recommended that funded agencies review these documents at regular intervals. Some programs may also have online, self-paced learning modules.

### 2. Healthy Aging CORE

[Healthy Aging CORE](#) (Collaborative Online Resources & Education) is a provincially coordinated, interactive on-line platform designed to foster communication, coordination, sector cohesion, capacity building, collective impact, and other collaborative efforts among community-based seniors' service (CBSS) agencies and stakeholders. CORE was developed because of extensive research and consultations aimed at addressing the lack of recognition of the value of CBSS programs in the broader community and by government, and the need to build capacity of the sector to address the growing needs of an aging population. Funded agencies are encouraged to access relevant resources and participate in training and development opportunities on CORE, including closed groups where relevant information is available and discussion forums are hosted.

### 3. Closed Groups on CORE

Closed and private learning groups on [Healthy Aging CORE](#) are used to support provincial COPs in an online format, and will enable access to relevant resources, facilitate ongoing learning, and help staff make connections. United Way BC staff will support traffic in these groups regularly. Agencies' participation in the group's activities will ensure relevant resources can be accessed by all funded agencies.

#### Discussion Forums

All funded agencies are encouraged to participate in the discussion forums on [Healthy Aging CORE](#). Discussion forums support and promote knowledge sharing and learning and mutual problem solving. **Note:** *The grantee must be bQ1h a member of [Healthy Aging CORE](#) and the respective closed group(s) to access this information.*

# Support from United Way BC Healthy Aging Specialists

United Way BC Healthy Aging Specialists work at regional levels and will help funded agencies to increase their capacity, support program development, and facilitate connections to other organizations and resources. Healthy Aging Specialists are also available to assist with questions regarding grant applications and reporting.

For program support or questions about funded agencies' roles and responsibilities related to the L&E activities, contact your region's Healthy Aging Specialist/or Manager:

***Vancouver, North Shore, Richmond,  
Sea to Sky & Sunshine Coast***

Dr. Beverley Pitman & Ravi Grewal  
[beverleyp@uwbc.ca](mailto:beverleyp@uwbc.ca)    [ravig@uwbc.ca](mailto:ravig@uwbc.ca)  
604.969.8331                      604.168.1300

***Burnaby, New Westminster, Tri-Cities, Surrey,  
Langley, Maple Ridge & Fraser Valley***

Dr. Indira Riadi  
[indirar@uwbc.ca](mailto:indirar@uwbc.ca)  
604.268.1342

***Vancouver Island & Gulf Islands***

Cheryl Baldwin  
[cherylb@uwbc.ca](mailto:cherylb@uwbc.ca)  
250.591.8731

***Interior BC***

Lisa Cyr  
[lcyr@uwbc.ca](mailto:lcyr@uwbc.ca)  
250.860.2356

***Northern BC***

Sarrah Storey  
[sarrahs@uwbc.ca](mailto:sarrahs@uwbc.ca)  
250.699.1681



[Grant Application 2025-26 Social Prescribing/Community Connector](#)

Response ID: [37270](#)

Submitted Date: 2025-03-12 05:59:25

Completion Time: 33 min. 39 sec.

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The following one-year grant application covers the period from April 1, 2025 to March 31, 2026.

Before completing the application form, we strongly recommend that you and your team read the entire application first.

Please note that the application must be completed and submitted **electronically** in the Salesforce granting platform, by **March 7, 2025**. All sections of the application are required unless marked as "Optional". Please double-check that all your documents have been submitted. **Once submitted, any further edits will not be updated unless specifically requested.**

Please note that the information that you provide on this form and supporting documents may be used to share information with others outside of United Way British Columbia such as funders, government, and the sector for purposes related to reviews, evaluations, research, advocacy, and other works of United Way British Columbia.

If you have any questions regarding this grant, please contact your UWBC Healthy Aging Specialist:

***Vancouver, North Shore, Richmond,  
Sea to Sky & Sunshine Coast***

Dr. Beverley Pitman  
[beverleyp@uwbc.ca](mailto:beverleyp@uwbc.ca)  
604.969.8331

***Burnaby, New Westminster, Tri-Cities, Surrey,  
Langley, Maple Ridge & Fraser Valley***

Dr. Indira Riadi  
[indirar@uwbc.ca](mailto:indirar@uwbc.ca)  
604.268.1342

***Vancouver Island & Gulf Islands***

Cheryl Baldwin  
[cherylb@uwbc.ca](mailto:cherylb@uwbc.ca)  
250.591.8731

***Interior BC***

Lisa Cyr  
[lcyr@uwbc.ca](mailto:lcyr@uwbc.ca)  
250.860.2356

***Northern BC***

Sarrah Storey  
[sarrahs@uwbc.ca](mailto:sarrahs@uwbc.ca)  
250.699.1681

For technical inquiries, please contact Mai Nguyen, Coordinator, Impact & Granting, at [main@uwbc.ca](mailto:main@uwbc.ca).

Reporting and Granting Requirements	Deadline	Period
2025-26 Grant Application	<b>March 7, 2025</b>	April 1, 2025 - March 31, 2026

Quarterly Report 1	July 31, 2025	April 1 – June 30, 2025
Quarterly Report 2	October 31, 2025	July 1 – September 30, 2025
Quarterly Report 3	January 30, 2026	October 1 – December 31, 2025
2025-26 Final Outcome Report	May 8, 2026	April 1, 2025 – March 31, 2026

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## SECTION 1: ORGANIZATION INFORMATION

### 1.1 GENERAL ORGANIZATION INFORMATION

Organization name:

**City of New Westminster**

Organization website:

**newwestcity.ca**

Street address:

**511 Royal Ave**

City:

**New Westminster**

Province:

**British Columbia**

Postal code:

**V3L 1H9**

Region:

**- Lower Mainland, Sea to Sky, & Fraser Valley**

Health authority:

**- FHA**

Telephone:

**604-519-1066**

Fax:

Charitable registration #:

BC Society #:

Indigenous governing body?

**No**

Indigenous-led Organization?

**No**

First Nations Band #:

Year organization was founded:

If you do not have a Charitable Registration number, a BC Society number or a First Nations Band number, please identify what your legal organization status is:

**Registered municipality**

Is your workplace unionized?

**Yes**

If yes, what local?

**CUPE Local 387**

Executive Director:

**Erica Mark**

Executive Director Email:

[emark@newwestcity.ca](mailto:emark@newwestcity.ca)

Organization Description / Mandate

**The City of New Westminster's objectives as related to City Council's strategic priority of community belonging and connecting are: \*People feel belonging through a shared sense of connection and identification with others. They feel accepted, included, and supported, and feel a sense of responsibility and commitment to the well-being of the community as a whole. \*People experience shared connection points, created through an environment where their ideas, impact, and contributions matter, and where new community members feel welcome and included. \*The City is a place where individuals, groups, and organizations are interconnected, linked, and work towards common goals and interests through community-building initiatives, and through platforms that facilitate communication, collaboration, and understanding among community members. \*Community connectivity creates a strong sense of belonging and social cohesion and enables individuals and groups to support each other. The City's strategic priorities and these objectives acts as the road map for steering the activities on behalf of the community and is grounded through contexts which all work should be measured. These include reconciliation, public engagement, climate action and environment, and diversity, equity, inclusion, and anti-racism (DEIAR). Century House, is a recreation centre for Adults 50+ that was constructed in 1958 by the City of New Westminster, as the Royal City's project during the British Columbia Centennial Celebration. The City of New Westminster works collaboratively with the Century House Association (CHA) and offers many programming activities together. The purpose of Century House is to provide, year-round opportunities that will help satisfy the leisure, educational and social needs of senior adults; and to provide an environment where members feel positive self-worth through acceptance by others, belonging, recognition, contribution and achievements. Century House offers a wide range of activities including: Social activities, CHA activity groups, volunteering opportunities, registered programs (arts, crafts, fitness, wellness, language, dance, sports, etc...), special events, bus trips, low cost food services supporting food security, emotional health and support groups, community driven committees, educational workshops, online programming and leadership training. Century House is co-located with the New Westminster Youth Centre so we also have intergenerational programming.**

## 1.2 APPLICANT INFORMATION

First Name:

**Erica**

Middle Name:

Last Name:

**Mark**

Title

**Manager, Recreation Services and Facilities**

Primary contact telephone:

**604-519-1066**

Primary contact email address:

[emark@newwestcity.ca](mailto:emark@newwestcity.ca)

## 1.3 TWO DESIGNATED LOA SIGNEES

Please note, if your application is successful, these are the two people we will be reaching out to for signatures on the LOA.

**First Signee:** Board President/Chair, Chief, or designate

Name	Title	Telephone	Email address
<b>Dean Gibson</b>	<b>Director of Parks and Recreation</b>	<b>604-527-4628</b>	<a href="mailto:dgibson@newwestcity.ca">dgibson@newwestcity.ca</a>

**Second Signee:** CEO, Executive Director, Senior Administrator, or designate

Name	Title	Telephone:	Email address
<b>Lisa Spitale</b>	<b>Chief Administrative Officer</b>	<b>604-527-4549</b>	<a href="mailto:lspitale@newwestcity.ca">lspitale@newwestcity.ca</a>

## 2.1 GENERAL PROGRAM INFORMATION

### SECTION 2: PROGRAM INFORMATION

Program Name: **New Westminster Social Prescribing**      Program Website:

· Program social media links and handles:

Facebook:  
**[www.facebook.com/newwestminster/](http://www.facebook.com/newwestminster/)**

Instagram:  
**[http://www.instagram.com/new\\_westminster/](http://www.instagram.com/new_westminster/)**

Twitter:  
**[http://twitter.com/new\\_westminster](http://twitter.com/new_westminster)**

YouTube:  
**[www.youtube.com/user/NewWestCity](http://www.youtube.com/user/NewWestCity)**

LinkedIn:

Other:

#### Program Description And Sites:

Program Description/Mandate: Please provide a brief description of the program. Include who the project will benefit and how (150 words max):

**The Seniors Community Connector (SCC) works with adults aged 50 and older who are referred by healthcare professionals, community partners, or who self-refer. The SCC assists seniors in connecting with various community supports and services through referrals, application assistance, advocacy, and introductions. In collaboration with each senior, the Community Connector develops a personalized wellness plan tailored to the individual's needs, providing the necessary support to help them age well and remain within their community. In addition to supporting seniors, the program also alleviates the mental and emotional strain on caregivers by offering resources and support for the seniors in their care. By addressing the determinants of healthy aging, the program helps reduce the burden on the healthcare system by focusing on preventative measures and enhancing overall well-being, which can result in fewer health crises and reduced demand for medical services.**

Please list key deliverables of the program (150 words max):

**\*Provide timely intakes and personalized support to seniors, connecting them to programs and resources that address their physical, social, emotional, and mental health needs. \*Monitor and follow up on each participant's progress to ensure continued support and successful outcomes. \*Strengthen partnerships and collaborate with other CBSS organizations to address complex service gaps for the**

**most vulnerable seniors, particularly those without family or friend support.**

**\*Identify service gaps and work with CBSS organizations to identify solutions that may increase resources, expand opportunities and address service gaps \*Enhance and expand community outreach with a focus on engaging marginalized and equity seeking seniors \*Connect seniors to culturally appropriate services and resources that help them stay connected to the community. \*Strengthen relationships and establish cohesive communication between healthcare providers and community connectors, ensuring seniors receive coordinated and comprehensive support.**

Please list all the program sites (addresses) where the program will take place:

**The Community Connector is predominantly at Century House (620 Eighth St., New Westminster); however, the Connector will look to expand service throughout the community to include tāmasewtx<sup>w</sup> Aquatic and Community Centre (65 E Sixth Ave., New Westminster), and Queensborough Community Centre (920 Ewen St. New Westminster) Other potential site visits could include: \*Ross Tower - 45 Clute St. \*United Gospel Mission - 658 Clarkson St. \*Sapperton Medical Clinic - 301 E. Columbia St. \*New Westminster Specialized Geriatric Clinic - 230 Ross Dr. \*Umbrella Multi-cultural Health Co-op - 715 Carnarvon St.**

How will you ensure that effective collaboration occurs among the organizations in your Healthy Aging Community Collaborative (250 words max)?

**The Community Connector will attend the regular Community Connectors Table meetings, as well as the CBSS network meetings. They will also participate in the bi-monthly SIAN meetings. In addition to the CBSS network meetings, the Community Connector will collaborate closely with the Seniors Services Society, the Century House Association, and other CBSS partners to ensure seniors are connected to the wide range of services provided by these organizations. The Community Connector will also work closely with the City of New Westminster Seniors Program Coordinator, Assistant Program Coordinators, and City of New Westminster Staff as needed. Furthermore, the Community Connector will be included in the bi-weekly meetings of the Century House and Youth Centre Staff Team to share information, discuss issues, and engage in problem-solving as a team. They will continue a weekly senior drop-in program, Community Connections, which offers the CBSS partners an opportunity to meet with New Westminster seniors and share information and resources.**

How would you describe the current level of partnership and collaboration taking place within your Healthy Aging Community Collaborative? Please rate from (1) to (6), with (1) being the lowest level of partnership and collaboration, and (6) being the highest level of partnership and collaboration.

**(5) Coordinate. Moving beyond occasional cooperation, we systematically align our efforts with other organizations, enhancing our collective impact on the outcome for older adults and family/friend caregivers**

*For more information on Healthy Aging Community Collaborative, please review the [Information Session: 2025-26 United Way BC's Healthy Aging Program Offerings Including Enhancement Grants](#).*

## 2.2 PROGRAM RATIONALE & TARGETS

Please see the [Healthy Aging Theory of Change \(TOC\) diagram](#) and accompanying narrative. This TOC is a visual depiction of the how the Community-Based Seniors' Services (CBSS) sector and Healthy Aging programs can collectively achieve Key Outcomes, Vision, and Impact.

Please describe how your program will address Healthy Aging stated objectives/goals/key outcomes, how your program will address each goal, and the estimated timeline/milestones. Please provide **3 or more** goals/objectives, per the list below and select each objective/goal/key outcome **once**.

Objective/Goal/Key Outcome	How will your program address each goal?	Estimated timelines/milestones	Additional Information (enter in N/A if not applicable)
<b>Enhanced collaboration and coordination within the CBSS sector</b>	<b>Community Connector attends bi-weekly Burnaby- New West Community Connectors meeting; regularly invites community partners for update meetings at Century House; attends bi-monthly SIAN meetings; attends Century House and Youth Centre staff meetings; invites community organizations, programs, and senior-focused businesses to weekly Community Connections drop-in program; collaborates weekly with Century House Association Peer Support program; and communicates on a monthly basis with our community partner - Seniors Services Society.</b>	<b>Ongoing. Continue progress check-ins at meetings to monitor expectations and outcomes. Collaborations are enhanced, as shown by addressing service gaps.</b>	<b>N/A</b>

<b>Enhanced collaboration and coordination with the health care system</b>	<b>Community Connector will focus on outreach to local health clinics, FH home health, Fraser Northwest Division of Family Practice to promote social prescribing; discuss the expectations and evaluate the progress so far.</b>	<b>Outreach will occur during first 6 months of fiscal year. Community Connector will conduct quarterly check-ins with healthcare partners to follow up on progress and address any ongoing needs.</b>	<b>N/A</b>
<b>Improvements made in the Determinants of Healthy Aging (see TOC)</b>	<b>Continue to provide community-based social meals and access to food; ensure access to social engagement programs to combat loneliness; promote physical activity programs.</b>	<b>Ongoing. Survey seniors regarding interests, awareness of resources and accessibility.</b>	<b>N/A</b>
<b>More seniors and Elders age safely and independently at home, in community</b>	<b>Advocate for addressing the gaps in essential services that support aging in place; raise awareness of available resources; encourage a comprehensive approach to aging healthily.</b>	<b>Take part in Age Friendly Strategy Working Group Meetings; Provide a minimum of two opportunities per month for 50+ community members to learn about available resources</b>	<b>N/A</b>
<b>Holistically meet the needs of seniors, Elders, and their caregivers</b>	<b>Continue identifying resources within the community and surrounding municipalities; co-create wellness plans that include holistic goals; advocate for services to fill gaps.</b>	<b>Ongoing. Evaluate successes on a quarterly basis and identify what is and isn't working for seniors overall.</b>	<b>N/A</b>
<b>Reduced health inequities (i.e. serving priority populations)</b>	<b>Prioritize referrals based on demographic vulnerability and critical needs related to the Social Determinants of Health.</b>	<b>Ongoing. Continually review intakes for potential inequities. Compile a resource of free or low cost services that address the social determinants of health that can be shared</b>	<b>N/A</b>



## 2.2 PROGRAM RATIONALE & TARGETS (CONTINUED...)

Is this program being delivered through a funding partnership with other agencies? (e.g. flow-through funding to another agency utilizing Gathering Place funds, etc.)?

**No**

If no: Please provide a description of how your program will encourage new partnerships.

**The program will encourage new partnerships by: \*identifying which organizations are not at the table and inviting them to the table \*Asset mapping organizations and services and updating regularly on new initiatives \*Identifying service gaps and developing solutions together \*Providing space and opportunity for partners to come together regularly \*Ensuring meetings are useful and meaningful to the partners \*Ensuring meetings are a safe, welcoming and supportive space for collaboration \*Regularly looking for ways to enhance opportunities for vulnerable seniors through resource and expertise sharing**

## 2.2 PROGRAM RATIONALE & TARGETS (CONTINUED...)

Who will be the main individuals (by role/function) involved in overseeing the program, including the budget?

**Recreation Supervisor - Youth and Seniors ( will oversee the program and budget and provide support to the Community Connector)**

All funded programs will be required to participate in United Way BC's Learning & Evaluation (L&E) activities, including but not limited to outcome reports, participation in Communities of Practice (COPs), participant satisfaction surveys, etc. In addition to these, does your agency have existing methods you use to measure the success of your programs?

**We have an anonymous comment box where people can provide feedback Ongoing relationship building and creating space for informal feedback**

## 2.2 PROGRAM RATIONALE & TARGETS (CONTINUED...)

**Please provide an estimate for participants, volunteers, and services you will track during the funding period by indicating a target in the box provided below. Note that United Way BC will be working in collaboration with funded agencies to set benchmark targets for all funding streams in the 2025-26 fiscal year. *You may be asked to revisit these if your application is successful.***

Number of unique individuals served:

Number of volunteers recruited:

Number of referrals to community resources

300

16

900

Assessment/triaging

300

Co-creation of wellness plan

300

Follow-up/check-in

1800

Health system navigation

60

Other grant specific targets (Please input total of all other services):

900

Other grant specific targets (Please list and describe):

**Arts Health Care Services Information Resources - legal, housing, financial Meal Support Services Physical Activity Social Services Program - Better at Home, peer support Transportation Other Community Resources - downsizing, caregiver info.**

Number of unique services provided:

3360

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## 2.3 HEALTHY AGING INTENDED PRIORITY POPULATION

Services will be aimed at community-dwelling seniors living in BC, and funded agencies should prioritize the delivery of services to seniors who are experiencing two or more of the following priority seniors' populations. **For more information, please view the Healthy Aging Priority Population Definitions on [Healthy Aging CORE BC](#).**

Healthy Aging Intended Priority Populations

- **Low to moderate income (Seniors who have challenges affording items like (i) adequate food, (ii) monthly mortgage/rent, (iii) sufficient home heat, (iv) prescribed medication, (v) transportation, (vi) other required prescribed health care.)**
- **Low to moderate frailty (People who need help with finances, transportation, heavy housework and similar tasks of daily living. Typically, mild frailty progressively impairs shopping, and walking outside alone, meal preparation, taking medications and begins to restrict light housework. Those with moderate frailty may need assistance with some aspects of personal care from the healthcare system or family/friend caregivers (adapted from the Clinical Frailty Scale (Rockwood))**
- **Socially isolated/lonely (A socially isolated senior is one who describes themselves as alone, disconnected from life and community, with reduced ability to participate and enjoy life as they have in the past. Challenges can include physical or mental health issues, mobility challenges (using a walker or cane), loss of a driver's license, a recent move, challenges with digital literacy, or loss of a**

partner, friends, community members, etc.)

**- Members of underserved/equity deserving groups**

Members of underserved/equity deserving groups:

- Caregivers**
- Cultural and/or linguistic barriers**
- Deaf and Hard of Hearing**
- Experiencing elder abuse**
- Experiencing mobility barriers**
- 2SLGBTQIA+**
- Newcomers: Temporary Residents**
- People with disabilities**
- Permanent Residents (immigrants and refugees)**
- Risk of homelessness**
- Risk/experiencing mental health issues**
- Risk/experiencing physical health issues**
- Women**

Briefly describe your strategies in serving Healthy Aging's Priority Populations, as described above (250 words max):

**To serve Healthy Aging's priority populations, we focus on providing places, programs and resources that are accessible, inclusive, supportive and tailored to seniors' unique needs. Low to moderate income seniors are referred to affordable resources and services that enhance physical, mental, and emotional well-being, which include community-based services that are either low-cost or free to reduce financial barriers. For seniors with low to moderate frailty, we provide resources and support to aid in personalized care through Home Support; physical activity programs that accommodate their mobility; education on falls prevention and safe movement, and home services that maintain healthy aging in place. To address social isolation, we implement initiatives in social engagement, such as a weekly Community Connections program, a peer support program, as well as bringing resources to where they reside to reduce barriers and create social connections in the community. Additionally we work to prioritize outreach and culturally sensitive care for seniors of underserved and equity-deserving groups, ensuring they have access to resources and programs that meet their needs. By continuing to build and strengthen community partnerships, along with providing individualized support, we aim to strengthen the health and well-being of vulnerable seniors to ensure they can age with dignity and independence.**

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**2.3 HEALTHY AGING INTENDED PRIORITY POPULATION (CONTINUED...)**

Please indicate the age range(s) of the populations you intend to serve in this program:

- 55-64**
- 65-74**
- 75-84**
- 85+**

Please select all the following sub-populations you plan to serve:

Indigenous Peoples:

- **Indigenous: First Nations**
- **Indigenous: Inuit**
- **Indigenous: Métis**
- **Indigenous: Off-Reserve and away-from-home**

Represented Communities:

- **Black**
- **East Asian (e.g. Chinese, Japanese, or Korean)**
- **Latin, Central, or South American**
- **South Asian**
- **Southeast Asian (e.g. Vietnamese, Filipino)**
- **West Asian/Middle Eastern (e.g. Iranian, Afghan)**
- **White**

Groups not otherwise mentioned:

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## **2.4 GEOGRAPHIC SERVING REGION(S)**

Please select the service delivery area(s) - please select all that apply:

- **Urban**

Please select all the regions you plan to serve in this program:

- **Lower Mainland, Sea to Sky, & Fraser Valley**

Lower Mainland, Sea to Sky, & Fraser Valley

- **New Westminster**

Please specify all communities (cities, towns, villages, municipalities, regional districts, First Nations Reserves, and Treaty Settlement Lands) that fall within your program's service delivery area. Please be as detailed as possible:

**The City of New Westminster has the following neighbourhoods: Queensborough, Connaught Heights, West End, Kelvin, Brow of the Hill, Glenbrooke, North Queen's Park, Victory Heights (includes Massey Heights), Sapperton, North Arm, South Arm, Uptown, Downtown, Brunette Creek. We recognize and respect that New Westminster is on the unceded and unsurrendered land of the Halkomelem speaking peoples.**

Proposed Budget - 2025-2026 Community Connector - Use of UWBC Funds (account of UWBC funds only)

### SECTION 3: FINANCIAL INFORMATION

All number fields should include numbers only. No commas or \$ symbols should be entered.

#### 3.1 PROPOSED BUDGET - USE OF UWBC FUNDS

Line	Item	Proposed Amount(\$)	Side
50	UWBC Funds	100000.00	Income

Line	Item	Proposed Amount(\$)	Side
102	UWBC funds remaining from prior year (2024-25)		Income

Edit this text	Edit this text	Proposed Amount(\$)	Edit this text
121	Gathering Place Funds	20000.00	Income

Line	Item	Proposed Amount(\$)	Side
150	Administration*	4479.00	Expense

Line	Item	Proposed Amount(\$)	Side
200	Salaries/benefits**	94021.00	Expense

Line	Item	Proposed Amount(\$)	Side
300	Volunteer costs	0.00	Expense

Line	Item	Proposed Amount(\$)	Side
400	Contractor fees**	0.00	Expense

Line	Item	Proposed Amount(\$)	Side
500	Program expenses*	1500.00	Expense

Edit this text  
560

Edit this text  
Gathering Place capital expenses

May include:

- Accessibility upgrades (i.e., improvements to the space to enhance accessibility such as installation of ramps, grab-bars in bathrooms, accessible doors, etc.),
- Renovations (i.e., changes to the space to enhance the functionality, safety and comfort of the space such as installation of air conditioning, heat pumps, building repairs)
- Social space improvements (i.e., purchase of furniture such as couches or tables, equipment, appliances, décor, technology such as sound systems, or other items to encourage participation within the space)
- Flow-through funds to another partner

organization in your Community Collaborative area

Edit this text

**20000.00**

Edit this text

**Expense**

Line	Item	Proposed Amount(\$)	Side
600	Travel - staff & non-staff	0.00	Expense

Line	Item	Proposed Amount(\$)	Side
700	Other expenses*	0.00	Expense

Total Income	Total Expenses	Surplus/Deficit (This proposed budget must balance)
120000.00	120000.00	0.00

Comments:

**Administrative: • Support staff time: \$4479 Program Expenses: • Training and/or capacity development: \$500 • Meeting expenses: \$500 • Marketing/public awareness o Design and printing/copying brochures: \$500**

**PLEASE NOTE:** Gathering Places are now a **CORE** Community Collaborative offering, and all Social Prescribing/Community Connector host organizations **must** provide a Gathering Place **unless** there is another organization within the community providing this/a similar opportunity to Healthy Aging's Priority Populations.

If your agency is applying for Gathering Place funding in line 121 on behalf of your Community Collaborative, please describe the space that will be used for this purpose. Please include details of the location, facilities, and activities:

**The Gathering Place is located in Century House. We have: -a community living room with comfortable chairs, tables, a games table, mini library and art displays - a multicultural space where people can learn about and embrace different cultures -a snooker room and dart room -a small gymnasium -a small fitness centre -a pottery studio -meeting spaces and large rooms for events**

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Proposed Budget Details - 2025-2026 - Use of UWBC funds (account of UWBC funds only)

### 3.2 PROPOSED BUDGET DETAILS - USE OF UWBC FUNDS

Salaries/benefits (Line 200) Please provide a breakdown on the rates and hours of all program staff salaries and benefits paid under the Community Connector (Use of UWBC Funds) budget. Include the total for both program staff coordinators and program staff service providers. Add as many positions as necessary by clicking the plus button at the

end of a row. Example: @\$20.00/hour x 40hours/week x 48 weeks + \$2,400/Year Benefits  
 Program Staff (Total amount must match Line 200)

**94021**

Position	Description	Rate (\$/hour)	Hours (weekly)	Weeks	Annual Benefits Amount (MERCs)	Amount(\$)
	<b>Program Coordinator - Community Connector</b>	<b>41</b>	<b>35</b>	<b>52</b>	<b>19401</b>	<b>94021.00</b>

Total

**94021.00**

Comments:

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Proposed Budget Details - 2025-2026 - Use of UWBC funds (account of UWBC funds only) (CONTINUED)

### 3.2 PROPOSED BUDGET DETAILS - USE OF UWBC FUNDS

Contractors (Line 400) Please provide a breakdown on the rates and hours of all contractors who deliver services under the Better at Home (Use of UWBC Funds) budget. Add as many contractors as necessary by clicking the plus button at the end of a row.Example: Housekeeping contractor @\$20.00/hour x 40hours/week x 48 weeksTotal amount must match Line 400.

**0**

Contractor	Rate (\$/hour)	Hours (weekly)	Weeks	Amount(\$)
				<b>0.00</b>

Total

**0**

Comments:

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### 3.2 PROPOSED BUDGET DETAILS

In-Kind Amounts Include all non-currency goods and services including:

- Admin staff time that is considered donated time (executive director, accountant, bookkeeper, receptionist, etc.). Example: Staff from lead organization may consistently donate time towards a group social activity/program.
- Computers, software, furniture, office equipment, etc.
- Donated/pro-bono meeting space
- Expertise (legal, tax, or business advice, marketing and website development, strategic planning, etc.)
- Other (please list all other in-kind amounts in the Comments area)

**65000.00**

Comments

**Admin staff, accountant, receptionist: \$40000**  
**Computers, software, furniture, office equipment: \$5000**  
**Meeting space: \$1000**  
**Office space: \$12,000**  
**Marketing: \$2000**  
**Janitorial: \$5000**

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Does your Social Prescribing/Community Connector program collect and utilize other revenue sources, such as other grants and/or donations?

**No - If no, please skip to the end of the application**

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#### **4. SUPPLEMENTAL INFORMATION**

##### **4.1 ADDITIONAL COMMENTS**

**Thank you for the opportunity. The Community Connector position at Century House has already made a huge impact on this community.**

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